

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:

JEEN HUR, ET AL.

Application No.:

Filed:

For: **ADAPTIVE WIRELESS NETWORK
SYSTEM COMPRISING CENTRAL
OPTIMIZER AND METHOD
THEREOF - UTILITY**

Art Group:

Examiner:



INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. §1.97

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Pursuant to Rule 1.97, Applicant desires to make of record the reference(s) set forth on the attached Form PTO 1449. A copy of each reference is submitted herewith.

It is hereby stated that this Information Disclosure Statement is being filed within three months of the filing date of the subject application, therefore no petition or fee is required. However, in the event a petition is needed for consideration of this Information Disclosure Statement, Applicant hereby so petitions. Please charge any additional fee due to Deposit Account 02-2666.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

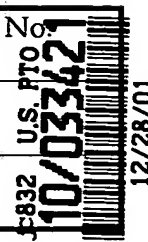
Date:

(12/28/01)

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Form PTO-1449 (Modified)	Atty Docket No. 51876P281	Application No.
<i>List of Patents & Publications Statement</i>	Applicant(s): Jeen Hur, et al.	
(Use several sheets if necessary)	Filing Date:	Group No.:



U.S. PATENT DOCUMENTS

Exam. Initials		Document Number	Date	Name	Class	Sub-class	Filing Date (if appropriate)
	AA	4412326	10/25/2083	Limb	370	85	
	AB	4543574	09/24/2085	Takagi et al.	340	825.5	
	AC	5864558	01/26/1999	Johnson	370	445	
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						

FOREIGN PATENT DOCUMENTS

Exam. Initials		Document Number	Date	Country	Class	Sub-class	Translation Yes	No
	AL							
	AM							
	AN							
	AO							
	AP							
	AQ							

OTHER ART (Including Title, Author, Date, Pertinent Pages, etc.)

Exam. Initials		Document Identification
	AR	
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Examiner: _____ Date Considered: _____

Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication